



# OHIO NA MOCK SKILLS

*Effective: 10-1-2024*

D&SDT-Headmaster



**Note:** The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Ohio Nurse Aide skill test, and the steps included herein are not intended to be used to provide complete care that would be all-inclusive of best care practiced in an actual work setting.

## HAND WASHING *(embedded in all of the possible mandatory tasks)*

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Turn on water.  |       |
|   | 2)  | Wet all surfaces of hands BEFORE applying soap.   |       |
|   | 3)  | Wet wrists BEFORE applying soap.  |       |
|   | 4)  | Apply soap to wet hands.  |       |
|   | 5)  | Rub hands together using friction.  |       |
|   | 6)  | While hands are not under running water, rub hands together for at least 20 seconds.  |       |
|   | 7)  | Interlace fingers pointing downward.  |       |
|   | 8)  | Wash all surfaces of hands and wrists with soap.  |       |
|   | 9)  | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |       |
|   | 10) | Dry hands and wrists with a clean paper towel(s).   |       |
|   | 11) | Immediately discard paper towel(s) in a trash container.  |       |
|   | 12) | Turn off the faucet with a clean, dry paper towel.  |       |
|   | 13) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |       |

## 1.) APPLY AN ANTI-EMBOLIC STOCKING ON A RESIDENT'S LEG

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Raise the bed between mid-thigh and waist level.  |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 5)  | Provide for resident's privacy by only exposing one leg.  |       |
|   | 6)  | Roll, gather, or turn the stocking down inside out to the heel.   |       |
|   | 7)  | Place stocking over resident's toes, foot, and heel.  |       |
|   | 8)  | Roll or pull stocking up one leg.   |       |
|   | 9)  | Check toes for possible pressure from stocking and adjust as needed.  |       |
|   | 10) | Leave the resident with a stocking that is smooth and wrinkle-free.   |       |
|   | 11) | Lower bed.  |       |
|   | 12) | Open the privacy curtain.   |       |
|   | 13) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 14) | Place the call light or signal device within easy reach of the resident.  |       |
|   | 15) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |

## 2.) ASSIST A RESIDENT TO AMBULATE USING A GAIT BELT

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                                      |       |
|   | 2)  | Explain the procedure to be performed to the resident.   |       |
|   | 3)  | Obtain a gait belt for the resident.   |       |
|   | 4)  | <b>Lock designated bed brake(s) to ensure resident's safety.</b>   |       |
|   | 5)  | <b>Lock wheelchair brakes to ensure resident's safety.</b>   |       |
|   | 6)  | Assist resident in putting on non-skid footwear.   |       |
|   | 7)  | Lower the bed so the resident's feet are flat on the floor when sitting on the edge of the bed.  |       |
|   | 8)  | Bring resident to a sitting position with resident's feet flat on the floor.   |       |
|   | 9)  | Place a gait belt around the resident's waist.   |       |
|   | 10) | Tighten the gait belt to the appropriate fitting/size.   |       |
|   | 11) | Check the gait belt for tightness by slipping fingers between the gait belt and the resident to ensure the gait belt is secure.                        |       |
|   | 12) | Face the resident and grasp the gait belt with both hands.   |       |
|   | 13) | Bring resident to a standing position using proper body mechanics at all times.  |       |
|   | 14) | Grasp the gait belt with one hand. With the other hand, stabilize the resident by holding the forearm or shoulder or using another appropriate method. |       |
|   | 15) | Position yourself behind and slightly to the side of the resident.   |       |
|   | 16) | Ambulate the resident at least ten steps to the wheelchair.  |       |
|   | 17) | Assist the resident in pivoting/turning and sitting in the wheelchair in a controlled manner, ensuring safety at all times.                            |       |
|   | 18) | Remove the gait belt.  |       |
|   | 19) | Maintain respectful, courteous interpersonal interactions at all times.  |       |
|   | 20) | Place the call light or signal device within easy reach of the resident.   |       |
|   | 21) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                                      |       |

### 3.) ASSIST A RESIDENT TO AMBULATE WITH A WALKER USING A GAIT BELT

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.               |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Obtain a gait belt for the resident.  |       |
|   | 4)  | <b>Lock designated bed brake(s) to ensure resident's safety.</b>  |       |
|   | 5)  | <b>Lock wheelchair brakes to ensure resident's safety.</b>  |       |
|   | 6)  | Assist the resident in putting on non-skid footwear.  |       |
|   | 7)  | Bring resident to a sitting position with resident's feet flat on the floor.  |       |
|   | 8)  | Place gait belt around resident's waist.  |       |
|   | 9)  | Tighten the gait belt to the appropriate fitting/size.  |       |
|   | 10) | Check the gait belt for tightness by slipping fingers between the gait belt and the resident to ensure the gait belt is secure. |       |
|   | 11) | Grasp the gait belt with one hand.  |       |
|   | 12) | Position the walker in front of the resident.   |       |
|   | 13) | Assist resident to standing position using proper body mechanics.   |       |
|   | 14) | Stabilize walker using hand and/or foot.  |       |
|   | 15) | Position yourself behind and slightly to the side of the resident.  |       |
|   | 16) | Ambulate the resident at least ten steps to the wheelchair.   |       |
|   | 17) | Assist the resident in pivoting/turning and sitting in the wheelchair in a controlled manner, ensuring safety at all times.     |       |
|   | 18) | Remove the gait belt.   |       |
|   | 19) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 20) | Place the call light or signal device within easy reach of the resident.  |       |
|   | 21) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.               |       |

## 4.) ASSIST A RESIDENT WITH A BEDPAN, MEASURE AND RECORD OUTPUT WITH HAND WASHING

*(one of the possible first mandatory tasks)*

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                     |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Gather supplies.  |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 5)  | Put on gloves.  |       |
|   | 6)  | Position the resident on a standard bedpan/fracture pan with the pan in the correct orientation and using the correct body mechanics. |       |
|   | 7)  | Raise the head of the bed.  |       |
|   | 8)  | Leave tissue within reach of the resident.  |       |
|   | 9)  | Leave the call light or signaling device within reach of the resident.  |       |
|   | 10) | Step away from the resident until the RN Test Observer identifies that the resident is finished.                                      |       |
|   | 11) | Upon returning, lower the head of the bed.  |       |
|   | 12) | Gently remove the bedpan.   |       |
|   | 13) | Hold the bedpan while the RN Test Observer pours fluid into the bedpan.   |       |
|   | 14) | Place the graduate on a flat surface for reading output at eye level and pour fluid into the graduate.                                |       |
|   | 15) | Empty the graduate into the designated toilet.  |       |
|   | 16) | Rinse and dry the bedpan and graduate, and return to storage.   |       |
|   | 17) | Obtain a wet washcloth and wash/assist the resident in washing hands.   |       |
|   | 18) | Dry/assist resident to dry hands.   |       |
|   | 19) | Place soiled linens in a designated container.  |       |
|   | 20) | Remove gloves, turning them inside out as they are removed, and dispose of them in a designated container.                            |       |
|   | 21) | Leave the resident in a position of comfort and safety.   |       |
|   | 22) | Record output on the provided, previously signed recording form.  |       |
|   | 23) | <b>The candidate's recorded output is within 25 mls of the RN Test Observer's recorded output.</b>                                    |       |
|   | 24) | Open the privacy curtain.   |       |
|   | 25) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 26) | Place the call light or signal device within easy reach of the resident.  |       |
|   | 27) | Turn on water.  |       |
|   | 28) | Wet all surfaces of hands BEFORE applying soap.   |       |
|   | 29) | Wet wrists BEFORE applying soap.  |       |
|   | 30) | Apply soap to wet hands.  |       |
|   | 31) | Rub hands together using friction.  |       |
|   | 32) | While hands are not under running water, rub hands together for at least 20 seconds.  |       |
|   | 33) | Interlace fingers pointing downward.  |       |

|  |     |   |  |
|--|-----|---|--|
|  | 34) | Wash all surfaces of hands and wrists with soap.  |  |
|  | 35) | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |  |
|  | 36) | Dry hands and wrists with a clean paper towel(s).   |  |
|  | 37) | Immediately discard paper towel(s) in a trash container.  |  |
|  | 38) | Turn off the faucet with a clean, dry paper towel.  |  |
|  | 39) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |  |

## 5.) BED BATH (Partial) - WHOLE FACE AND ONE ARM, HAND AND UNDERARM

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Fill a basin with warm water.   |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 5)  | Raise the bed between mid-thigh and waist level.  |       |
|   | 6)  | Cover the resident with a bath blanket or clean sheet.  |       |
|   | 7)  | Fanfold bed linens down to the waist or move linens to the opposite side.   |       |
|   | 8)  | Remove the resident's gown without exposing the resident.   |       |
|   | 9)  | Place the gown in a designated container.   |       |
|   | 10) | Wash face WITHOUT SOAP and pat dry.   |       |
|   | 11) | Place a towel under the arm, exposing one arm.  |       |
|   | 12) | Wash arm, hand and underarm using soap and water.   |       |
|   | 13) | Rinse arm, hand, and underarm.  |       |
|   | 14) | Pat dry arm, hand, and underarm.  |       |
|   | 15) | Assist resident in putting on a clean gown.   |       |
|   | 16) | Empty, rinse, and dry equipment and return to storage.  |       |
|   | 17) | Place soiled linen in a designated container.   |       |
|   | 18) | Lower bed.  |       |
|   | 19) | Open the privacy curtain.   |       |
|   | 20) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 21) | Place the call light or signaling device within easy reach of the resident.                                       |       |
|   | 22) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |



## 6.) CHANGE A MALE RESIDENT'S BRIEF, PROVIDE PERINEAL CARE WITH HAND WASHING

(one of the possible first mandatory tasks) [DEMONSTRATED ON A MANIKIN]

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |
|   | 2)  | Explain the procedure to be performed to the resident [manikin].   |       |
|   | 3)  | Fill a basin with warm water.  |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 5)  | Raise the bed between mid-thigh and waist level.   |       |
|   | 6)  | Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer or Actor to stand on the side of the bed opposite the working side. |       |
|   | 7)  | Obtain a brief.  |       |
|   | 8)  | Put on gloves.   |       |
|   | 9)  | Place bath blanket or clean sheet over resident to maintain privacy.   |       |
|   | 10) | Place waterproof pad under resident's buttocks by turning resident toward the side or raising hips.  |       |
|   | 11) | Expose perineum only.  |       |
|   | 12) | Unfasten the wet brief on both sides.  |       |
|   | 13) | Remove the soiled brief under resident [manikin] by rolling resident [manikin] side-to-side OR raising hips.   |       |
|   | 14) | Discard the soiled brief in a designated container.  |       |
|   | 15) | Gently grasp the penis.  |       |
|   | 16) | Use water and a soapy washcloth.   |       |
|   | 17) | Clean tip of penis starting at the urethral opening, working outward with a circular motion.   |       |
|   | 18) | Clean the shaft of the penis with motions away from the tip of the penis.  |       |
|   | 19) | <b>Use a clean portion of a washcloth with each stroke.</b>  |       |
|   | 20) | Clean the scrotum with a clean portion of a washcloth.   |       |
|   | 21) | Rinse the penis with a new washcloth.  |       |
|   | 22) | Rinse the penis using a clean portion of a washcloth with each stroke.   |       |
|   | 23) | Rinse the scrotum using a clean portion of a washcloth with each stroke.   |       |
|   | 24) | Pat dry the area.  |       |
|   | 25) | Recover the exposed area with the bath blanket or clean sheet.   |       |
|   | 26) | Assist resident in turning onto their side away from the working side of the bed.  |       |
|   | 27) | Use a new, soapy washcloth to clean the rectal area.   |       |
|   | 28) | <b>Clean the area from the scrotum to the rectal area using a clean portion of a washcloth with each stroke.</b>   |       |
|   | 29) | Use a new washcloth.   |       |

|     |   |  |
|-----|---|--|
| 30) | Rinse the area from the scrotum to the rectal area using a clean portion of a washcloth with each stroke.   |  |
| 31) | Pat dry the area.   |  |
| 32) | Apply a new brief by rolling resident [manikin] side-to-side OR raising hips.   |  |
| 33) | Pull the front of the brief through, ensuring it is even on both sides of the resident [manikin], and fasten it securely on both sides.                           |  |
| 34) | Remove the waterproof pad, without friction, by turning resident [manikin] side-to-side or raising hips.  |  |
| 35) | Remove the bath blanket or sheet.   |  |
| 36) | Dispose of all soiled linen in the designated container.  |  |
| 37) | Position the resident on his back.  |  |
| 38) | Lower bed.  |  |
| 39) | Lower side rail(s) if side rails were used.   |  |
| 40) | Empty, rinse, dry, and return equipment to storage.   |  |
| 41) | Remove gloves, turning them inside out as they are removed, and dispose of them in a designated container.  |  |
| 42) | Open the privacy curtain.   |  |
| 43) | Leave the resident in a position of comfort and safety.   |  |
| 44) | Maintain respectful, courteous interpersonal interactions at all times.   |  |
| 45) | Place call light or signaling device within easy reach of resident.   |  |
| 46) | Turn on water.  |  |
| 47) | Wet all surfaces of hands BEFORE applying soap.   |  |
| 48) | Wet wrists BEFORE applying soap.  |  |
| 49) | Apply soap to wet hands.  |  |
| 50) | Rub hands together using friction.  |  |
| 51) | While hands are not under running water, rub hands together for at least 20 seconds.  |  |
| 52) | Interlace fingers pointing downward.  |  |
| 53) | Wash all surfaces of hands and wrists with soap.  |  |
| 54) | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |  |
| 55) | Dry hands and wrists with a clean paper towel(s).   |  |
| 56) | Immediately discard paper towel(s) in a trash container.  |  |
| 57) | Turn off the faucet with a clean, dry paper towel.  |  |
| 58) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |  |

## 7.) DENTURE CARE – CLEAN A RESIDENT’S UPPER OR LOWER DENTURE

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Line the bottom of the sink with a protective lining that would help prevent damage to the dentures. <i>(Use a cloth towel or washcloth; do not use paper towels.)</i>  |       |
|   | 4)  | Put on gloves.  |       |
|   | 5)  | Remove the denture from the cup.  |       |
|   | 6)  | Handle denture carefully to avoid damage being careful to avoid contamination.  |       |
|   | 7)  | Empty and rinse the denture cup.  |       |
|   | 8)  | Apply toothpaste.   |       |
|   | 9)  | Thoroughly brush denture, including the inner, outer, and chewing surfaces of an upper or lower denture. <i>(Only one plate is used during testing. Toothettes may be utilized instead of a toothbrush as long as all surfaces listed are cleaned.)</i> |       |
|   | 10) | Rinse denture using clean, cool water.  |       |
|   | 11) | Place denture in the rinsed denture cup.  |       |
|   | 12) | Add cool, clean water to the denture cup.   |       |
|   | 13) | Clean and dry equipment and return to storage.  |       |
|   | 14) | Discard the protective lining in the designated container.  |       |
|   | 15) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 16) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 17) | Remove gloves, turning them inside out as they are removed.   |       |
|   | 18) | Dispose of gloves in a designated container.  |       |
|   | 19) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |

## 8.) DONN (PUT ON) PPE (GOWN, GLOVES, GOGGLES OR FACE SHIELD), EMPTY A URINARY DRAINAGE BAG, MEASURE AND RECORD OUTPUT, DOFF (REMOVE) PPE WITH HAND WASHING

*(one of the possible first mandatory tasks)*

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |
|   | 2)  | Unfold the gown.  |       |
|   | 3)  | Put on a gown, fully covering the torso and wrapping it around the back.  |       |
|   | 4)  | Fasten at the neck and the waist.   |       |
|   | 5)  | Put on goggles or a face shield appropriately over the eyes or face.  |       |
|   | 6)  | Put on gloves.  |       |
|   | 7)  | Extend gloves over the wrists of the gown.  |       |
|   | 8)  | Explain the procedure to be performed to the resident.  |       |
|   | 9)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 10) | Raise the bed between mid-thigh and waist level.  |       |
|   | 11) | Place a barrier on the floor under the drainage bag.  |       |
|   | 12) | Place the graduate on the previously placed barrier.  |       |
|   | 13) | Open the drain to allow the urine to flow into the graduate until the bag is empty.                               |       |
|   | 14) | Avoid touching the graduate with the tip of the tubing.   |       |
|   | 15) | Close the drain.  |       |
|   | 16) | Wipe the drain with an antiseptic wipe AFTER the drainage bag is empty.   |       |
|   | 17) | Replace the drain in the holder.  |       |
|   | 18) | Lower bed.  |       |
|   | 19) | Place the graduate on a level, flat surface.  |       |
|   | 20) | With the graduate at eye level, read the output.  |       |
|   | 21) | Empty the graduate into the designated toilet.  |       |
|   | 22) | Rinse, dry, and return equipment to storage.  |       |
|   | 23) | Leave the resident in a position of comfort and safety.   |       |
|   | 24) | Record output on the provided, previously signed recording form.  |       |
|   | 25) | <b>The candidate's measured output reading is within 25 mls of the RN Test Observer's output reading.</b>         |       |
|   | 26) | Open the privacy curtain.   |       |
|   | 27) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 28) | Place the call light or signaling device within easy reach of the resident.                                       |       |
|   | 29) | Remove gloves BEFORE the gown turns inside out as they are removed.   |       |
|   | 30) | Dispose of gloves in a designated container.  |       |
|   | 31) | Remove goggles or face shield from the back by lifting ear pieces or headband.                                    |       |

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|-----|---|--|
| 32) | Place goggles or face shield in a designated container.   |  |
| 33) | Unfasten the gown at the neck.  |  |
| 34) | Unfasten the gown at the waist.   |  |
| 35) | Pull the gown away from the neck, touching only the inside of the gown.   |  |
| 36) | Turn the gown inside out and roll it into a bundle.   |  |
| 37) | Dispose of the gown in the designated container.  |  |
| 38) | Turn on water.  |  |
| 39) | Wet all surfaces of hands BEFORE applying soap.   |  |
| 40) | Wet wrists BEFORE applying soap.  |  |
| 41) | Apply soap to wet hands.  |  |
| 42) | Rub hands together using friction.  |  |
| 43) | While hands are not under running water, rub hands together for at least 20 seconds.  |  |
| 44) | Interlace fingers pointing downward.  |  |
| 45) | Wash all surfaces of hands and wrists with soap.  |  |
| 46) | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |  |
| 47) | Dry hands and wrists with a clean paper towel(s).   |  |
| 48) | Immediately discard paper towel(s) in a trash container.  |  |
| 49) | Turn off the faucet with a clean, dry paper towel.  |  |
| 50) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |  |

## 9.) DONN (PUT ON) PPE (A GOWN, GLOVES AND GOGGLES OR FACE SHIELD), PROVIDE CATHETER CARE FOR A FEMALE RESIDENT, DOFF (REMOVE) PPE WITH HAND WASHING

(one of the possible first mandatory tasks) [DEMONSTRATED ON A MANIKIN]

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |
|   | 2)  | Unfold the gown.   |       |
|   | 3)  | Put on a gown, fully covering the torso and wrapping it around the back.   |       |
|   | 4)  | Fasten at the neck and the waist.  |       |
|   | 5)  | Put on goggles or a face shield appropriately over the eyes or face.   |       |
|   | 6)  | Put on gloves.   |       |
|   | 7)  | Extend gloves over the wrists of the gown.   |       |
|   | 8)  | Explain the procedure to be performed to the resident.   |       |
|   | 9)  | Fill a basin with warm water.  |       |
|   | 10) | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 11) | Raise the side rail on the side of the bed that is opposite the working side of the bed or request the RN Test Observer to stand on the side of the bed opposite the working side. |       |
|   | 12) | Raise the bed between mid-thigh and waist level.   |       |
|   | 13) | Place a bath blanket or clean sheet over the resident to maintain privacy.   |       |
|   | 14) | Turn resident [manikin] (side-to-side), or raise hips and place a waterproof pad under resident [manikin].   |       |
|   | 15) | Verbalize the act of checking while physically checking to see that urine can flow unrestricted into the drainage bag.   |       |
|   | 16) | Use soap and water to carefully wash around the catheter where it exits the urethra.   |       |
|   | 17) | <b>With one hand holding the catheter near the urethra to prevent tugging on the catheter.</b>   |       |
|   | 18) | Cleans at least 3-4 inches from the urethra down the drainage tube with the other hand.  |       |
|   | 19) | <b>Clean with strokes only away from the urethra.</b> (A washcloth wrapped around the tubing with one stroke is okay.)   |       |
|   | 20) | Use a clean portion of a washcloth for each stroke.  |       |
|   | 21) | <b>Rinse with strokes only away from the urethra.</b> (A washcloth wrapped around the tubing with one stroke is okay.)   |       |
|   | 22) | Use a clean portion of a washcloth for each stroke.  |       |
|   | 23) | Pat dry with a clean towel.  |       |
|   | 24) | Do not allow the tube to be pulled at any time during the procedure.   |       |
|   | 25) | Replace the top cover over the resident.   |       |
|   | 26) | Remove the bath blanket or sheet.  |       |
|   | 27) | Remove the waterproof pad, without friction, by turning the resident [manikin] side-to-side or raising hips.   |       |

|     |   |  |
|-----|---|--|
| 28) | Place all soiled linens in a designated container.  |  |
| 29) | Empty, rinse, dry, and return equipment to storage.   |  |
| 30) | Lower bed.  |  |
| 31) | Lower side rail(s) if side rails were used.   |  |
| 32) | Leave the resident in a position of comfort and safety.   |  |
| 33) | Open the privacy curtain.   |  |
| 34) | Maintain respectful, courteous interpersonal interactions at all times.   |  |
| 35) | Place the call light or signaling device within easy reach of the resident.   |  |
| 36) | Remove gloves BEFORE the gown turns inside out as they are removed.   |  |
| 37) | Dispose of gloves in a designated container.  |  |
| 38) | Remove goggles or face shield from the back by lifting ear pieces or headband.  |  |
| 39) | Place goggles or face shield in a designated container.   |  |
| 40) | Unfasten the gown at the neck.  |  |
| 41) | Unfasten the gown at the waist.   |  |
| 42) | Pull the gown away from the neck, touching only the inside of the gown.   |  |
| 43) | Turn the gown inside out and roll it into a bundle.   |  |
| 44) | Dispose of the gown in the designated container.  |  |
| 45) | Turn on water.  |  |
| 46) | Wet all surfaces of hands BEFORE applying soap.   |  |
| 47) | Wet wrists BEFORE applying soap.  |  |
| 48) | Apply soap to wet hands.  |  |
| 49) | Rub hands together using friction.  |  |
| 50) | While hands are not under running water, rub hands together for at least 20 seconds.  |  |
| 51) | Interlace fingers pointing downward.  |  |
| 52) | Wash all surfaces of hands and wrists with soap.  |  |
| 53) | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |  |
| 54) | Dry hands and wrists with a clean paper towel(s).   |  |
| 55) | Immediately discard paper towel(s) in a trash container.  |  |
| 56) | Turn off the faucet with a clean, dry paper towel.  |  |
| 57) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |  |

## 10.) DRESS A BEDRIDDEN RESIDENT WITH AN AFFECTED (WEAK) SIDE

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 4)  | Raise the bed between mid-thigh and waist level.  |       |
|   | 5)  | Keep the resident covered while removing the gown with a sheet, top cover, or bath blanket.   |       |
|   | 6)  | Remove the gown from the unaffected side first.   |       |
|   | 7)  | Place the soiled gown in a designated container.  |       |
|   | 8)  | When dressing the resident in a shirt or blouse, insert your hand through the sleeve of the shirt or blouse and grasp the resident's hand.  |       |
|   | 9)  | When dressing the resident in a shirt/blouse, always dress from the affected side first.  |       |
|   | 10) | When dressing the resident in pants, assist the resident in raising their hips or turning them from side to side and pull the pants over the buttocks and up to the resident's waist. |       |
|   | 11) | When dressing the resident in pants, always dress the resident from the affected side first.  |       |
|   | 12) | Apply resident's non-skid footwear.   |       |
|   | 13) | Leave the resident comfortably and properly dressed and in a position of safety.  |       |
|   | 14) | Lower bed.  |       |
|   | 15) | Open the privacy curtain.   |       |
|   | 16) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 17) | Place call light or signaling device within easy reach of the resident.   |       |
|   | 18) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |



## 11.) FEED A DEPENDENT RESIDENT IN BED

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Verbalize identifying the resident's name against the diet card and verbalize that the resident has received the correct tray while actually checking the diet card and tray. |       |
|   | 4)  | Position the resident in an upright position that is at least 45 degrees.   |       |
|   | 5)  | Protect clothing from soiling by using a napkin, clothing protector, or towel.  |       |
|   | 6)  | Wash and dry the resident's hands BEFORE feeding.   |       |
|   | 7)  | Place soiled linen in a designated container.   |       |
|   | 8)  | Remain at eye level, facing the resident while feeding the resident.  |       |
|   | 9)  | Describe the foods being offered to the resident.   |       |
|   | 10) | Offer each fluid frequently.  |       |
|   | 11) | Offer food in small amounts at a reasonable rate, allowing the resident time to chew and swallow.   |       |
|   | 12) | Wipe the resident's face during the meal.   |       |
|   | 13) | Leave the resident in bed with the head of the bed set up to at least 30 degrees.   |       |
|   | 14) | Record intake in a percentage of total solid food eaten on provided, previously signed recording form.  |       |
|   | 15) | <b>The candidate's recorded consumed food intake must be within 25 percentage points of the RN Test Observer's recorded food intake.</b>                                      |       |
|   | 16) | Record the sum of total fluid consumed in ml on the provided, previously signed recording form.   |       |
|   | 17) | <b>The candidate's recorded total consumed fluid intake is within 60 mls of the RN Test Observer's recorded fluid intake.</b>   |       |
|   | 18) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 19) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 20) | Remove the clothing protector and place it in an appropriate container.   |       |
|   | 21) | Leave the resident clean.   |       |
|   | 22) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |

## 12.) HAIR CARE FOR A RESIDENT

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 4)  | Place a towel on the resident's shoulders.  |       |
|   | 5)  | Ask the resident how they would like their hair styled.   |       |
|   | 6)  | Comb/brush/style hair gently and completely.  |       |
|   | 7)  | Discard linen in a designated container.  |       |
|   | 8)  | Leave the resident's hair neatly brushed/combed/styled.   |       |
|   | 9)  | Open the privacy curtain.   |       |
|   | 10) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 11) | Place the call light or signaling device within easy reach of the resident.                                       |       |
|   | 12) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry. |       |

### 13.) MAKE A RESIDENT OCCUPIED BED

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                                     |       |
|   | 2)  | Gather linen and transport it correctly.  |       |
|   | 3)  | Place linen on a clean surface. You may place linen on the over-bed table, over the back of a chair, on a bedside stand, or over the foot of the bed. |       |
|   | 4)  | Explain the procedure to be performed to the resident.  |       |
|   | 5)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 6)  | <b>Raise the side rail opposite the working side of the bed, or request the RN Test Observer to opposite the working side of the bed.</b>             |       |
|   | 7)  | Raise the bed between the mid-thigh and waist level.  |       |
|   | 8)  | Assist the resident in rolling onto the side toward the raised side rail or the RN Test Observer.   |       |
|   | 9)  | Roll or fan fold soiled linen, soiled side inside, to the center of the bed.  |       |
|   | 10) | Place a clean bottom sheet along the center of the bed, roll or fan-fold linen against the resident's back, and unfold the remaining half.            |       |
|   | 11) | Secure two fitted corners of the clean bottom sheet.  |       |
|   | 12) | <b>Raise the side rail on the other side of the bed or request the RN Test Observer to be opposite the working side of the bed.</b>                   |       |
|   | 13) | Assist the resident in rolling over the bottom line, preventing trauma and avoidable pain to a resident at all times.                                 |       |
|   | 14) | Remove soiled linen without shaking.  |       |
|   | 15) | Avoid touching linen to uniform.  |       |
|   | 16) | Place soiled linen in a designated container.   |       |
|   | 17) | Pull through and smooth out the clean bottom linen.   |       |
|   | 18) | Secure the other two fitted corners.  |       |
|   | 19) | Place clean top linen and blanket or bedspread over the covered resident while removing used linen.   |       |
|   | 20) | Keep resident unexposed at all times.   |       |
|   | 21) | Tuck in top linen and blanket or bedspread at the foot of the bed.  |       |
|   | 22) | Make mitered corners at the foot of the bed.  |       |
|   | 23) | Apply a clean pillow case with zippers and/or pillow tags to the inside.  |       |
|   | 24) | Gently lift the resident's head while replacing the pillow.   |       |
|   | 25) | Leave the bed completely and neatly made without wrinkles.  |       |
|   | 26) | Ensure the sheet and top linen do not constrict the resident's feet.  |       |
|   | 27) | Lower bed.  |       |
|   | 28) | Lower side rails if side rails were used.   |       |
|   | 29) | Open the privacy curtain.   |       |
|   | 30) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 31) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 32) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                                     |       |

## 14.) MOUTH CARE – BRUSH A RESIDENT’S TEETH

| ✓ | #         | Skill Task Step   | Notes |
|---|-----------|---|-------|
|   | 1)        | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |
|   | 2)        | Explain the procedure to be performed to the resident.  |       |
|   | <b>3)</b> | <b>Put on gloves.</b>   |       |
|   | 4)        | Gather equipment/supplies.  |       |
|   | 5)        | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 6)        | Drape the chest with a chest barrier (cloth or paper towel) to prevent soiling.   |       |
|   | 7)        | Wet the toothbrush and apply a small amount of toothpaste to the toothbrush. (If available, toothettes may be utilized instead of the toothbrush as long as all the surfaces listed are cleaned.) |       |
|   | <b>8)</b> | <b>Brush the resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.</b>   |       |
|   | 9)        | Clean tongue.   |       |
|   | 10)       | Assist resident in rinsing their mouth.   |       |
|   | 11)       | Wipe the resident's mouth.  |       |
|   | 12)       | Remove the clothing protector and place it in the appropriate container.  |       |
|   | 13)       | Empty container. <i>(Note: Container may be an emesis basin or a disposable cup.)</i>   |       |
|   | 14)       | Rinse the emesis basin if used, or discard disposable items in a trash container.   |       |
|   | 15)       | Dry emesis basin if used.   |       |
|   | 16)       | Rinse toothbrush.   |       |
|   | 17)       | Return equipment to storage.  |       |
|   | 18)       | Leave the resident in a position of comfort.  |       |
|   | 19)       | Open the privacy curtain.   |       |
|   | 20)       | Maintain respectful, courteous interpersonal interactions at all times  |       |
|   | 21)       | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 22)       | Remove gloves, turning them inside out as they are removed.   |       |
|   | 23)       | Dispose of gloves in a designated container.  |       |
|   | 24)       | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |

## 15.) NAIL CARE FOR A RESIDENT

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                |       |
|   | 2)  | Explain the procedure to be performed to the resident.   |       |
|   | 3)  | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 4)  | Immerse the resident's nails in warm water.  |       |
|   | 5)  | Soak nails for at least five minutes. The candidate may verbalize the five minutes, which the RN Test Observer will acknowledge. |       |
|   | 6)  | Gently push the cuticle back with a wet washcloth. ( <b>DO NOT</b> use an orange stick to push back cuticles.)                   |       |
|   | 7)  | Dry the resident's hand thoroughly, making sure to dry carefully between the fingers.  |       |
|   | 8)  | Gently clean under the nails with an orange stick.   |       |
|   | 9)  | Wipe the orange stick at least one time during the procedure.  |       |
|   | 10) | File each fingernail.  |       |
|   | 11) | Empty, rinse, dry, and return equipment to storage.  |       |
|   | 12) | Place soiled linen in a designated container.  |       |
|   | 13) | Discard the orange stick in the designated container.  |       |
|   | 14) | Open the privacy curtain.  |       |
|   | 15) | Maintain respectful, courteous interpersonal interactions at all times.  |       |
|   | 16) | Place the call light or signaling device within easy reach of the resident.  |       |
|   | 17) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.                |       |

## 16.) PERINEAL CARE FOR A FEMALE RESIDENT WITH HAND WASHING

(one of the possible first mandatory tasks) [DEMONSTRATED ON A MANIKIN]

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |
|   | 2)  | Explain the procedure to be performed to the resident [manikin].   |       |
|   | 3)  | Fill a basin with warm water.  |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 5)  | Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer or Actor to stand on the side of the bed opposite the working side.       |       |
|   | 6)  | Raise the bed to between mid-thigh and waist level.  |       |
|   | 7)  | Place a bath blanket or clean sheet over the resident.   |       |
|   | 8)  | Put on gloves.   |       |
|   | 9)  | Place a waterproof pad under the resident's buttocks by turning the resident side-to-side or raising the hips.   |       |
|   | 10) | Expose the perineum only.  |       |
|   | 11) | Use water and a soapy washcloth.   |       |
|   | 12) | <b>Clean both sides and the middle of the labia from top to bottom with a clean portion of the washcloth for each stroke.</b>  |       |
|   | 13) | Use a new, clean washcloth.  |       |
|   | 14) | Using a new, clean washcloth, rinse the area from top to bottom, using a clean portion of the washcloth with each stroke.  |       |
|   | 15) | Pat dry the area with a clean portion of the towel for each pat.   |       |
|   | 16) | Cover the exposed area with the bath blanket or clean sheet.   |       |
|   | 17) | Assist resident in turning onto their side away from the working side of the bed.  |       |
|   | 18) | With a new clean washcloth with water and soap, clean the rectal area.   |       |
|   | 19) | <b>Clean the rectal area from the vagina to the rectal area using at least two single strokes with a clean portion of the washcloth for every single stroke.</b>               |       |
|   | 20) | Use a new, clean washcloth.  |       |
|   | 21) | Using a new, clean washcloth, rinse the rectal area from the vagina to the rectal area. Use at least two single strokes. Use a clean portion of the washcloth for each stroke. |       |
|   | 22) | Pat dry area from vagina to rectal area.   |       |
|   | 23) | Remove the waterproof pad from under the buttocks, without friction, by turning resident [manikin] side-to-side or raising hips.   |       |
|   | 24) | Position the resident on her back.   |       |
|   | 25) | Remove the bath blanket or sheet.  |       |
|   | 26) | Place all soiled linen in a designated container.  |       |
|   | 27) | Empty, rinse, dry, and return equipment to storage.  |       |
|   | 28) | Remove gloves, turn inside out as they are removed, and dispose of them in the designated container.   |       |

|     |   |  |
|-----|---|--|
| 29) | Lower bed.  |  |
| 30) | Lower side rail(s) if side rails were used.   |  |
| 31) | Open the privacy curtain.   |  |
| 32) | Maintain respectful, courteous interpersonal interactions at all times.   |  |
| 33) | Place the call light or signaling device within easy reach of the resident.   |  |
| 34) | Turn on water.  |  |
| 35) | Wet all surfaces of hands BEFORE applying soap.   |  |
| 36) | Wet wrists BEFORE applying soap.  |  |
| 37) | Apply soap to wet hands.  |  |
| 38) | Rub hands together using friction.  |  |
| 39) | While hands are not under running water, rub hands together for at least 20 seconds.  |  |
| 40) | Interlace fingers pointing downward.  |  |
| 41) | Wash all surfaces of hands and wrists with soap.  |  |
| 42) | Rinse hands and wrists thoroughly under running water with fingers pointed downward.  |  |
| 43) | Dry hands and wrists with a clean paper towel(s).   |  |
| 44) | Immediately discard paper towel(s) in a trash container.  |  |
| 45) | Turn off the faucet with a clean, dry paper towel.  |  |
| 46) | <b>Do not re-contaminate hands at any time during the hand-washing procedure.</b> (Using a wet paper towel to turn off the faucet is considered recontamination.) |  |

## 17.) POSITION A RESIDENT IN BED ON THEIR SIDE

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |
|   | 2)  | Explain the procedure to be performed to the resident.   |       |
|   | 3)  | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 4)  | Position the bed flat.   |       |
|   | 5)  | Raise the bed between mid-thigh and waist level.   |       |
|   | 6)  | <b>Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer to stand on the side of the bed opposite the working side.</b> |       |
|   | 7)  | From the working side of the bed, gently move the resident's upper body toward yourself.   |       |
|   | 8)  | From the working side of the bed, gently move the resident's hips toward yourself.   |       |
|   | 9)  | From the working side of the bed, gently move the resident's legs toward yourself.   |       |
|   | 10) | Assist/turn the resident onto the correct side, as stated by the RN Test Observer in the scenario.   |       |
|   | 11) | Ensure that the resident's face never becomes obstructed by the pillow.  |       |
|   | 12) | Check to be sure the resident is not lying on their downside arm.  |       |
|   | 13) | Readjust or place a support device under the resident's head.  |       |
|   | 14) | Place support devices under the resident's upside arm, behind the back, and between the knees.   |       |
|   | 15) | <b>Physically check that the resident is in correct body alignment.</b>  |       |
|   | 16) | Leave the resident in a position of comfort and safety.  |       |
|   | 17) | Lower side rails, if side rails were used.   |       |
|   | 18) | Lower bed.   |       |
|   | 19) | Open the privacy curtain.  |       |
|   | 20) | Maintain respectful, courteous interpersonal interactions at all times.  |       |
|   | 21) | Place the call light or signaling device within easy reach of the resident.  |       |
|   | 22) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |



## 18.) RANGE OF MOTION FOR A RESIDENT'S HIP AND KNEE

| ✓ | #   | Skill Task Step  | Notes |
|---|-----|--|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.            |       |
|   | 2)  | Explain the procedure to be performed to the resident.   |       |
|   | 3)  | Raise the bed between mid-thigh and waist level.   |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.  |       |
|   | 5)  | Position the resident supine (bed flat).   |       |
|   | 6)  | Leave the resident in good body alignment.   |       |
|   | 7)  | Place one hand under the resident's knee and the other hand under the resident's ankle.                                      |       |
|   | 8)  | Move the entire leg away from the resident's body. (abduction)   |       |
|   | 9)  | Move the entire leg back toward the resident's body. (adduction)   |       |
|   | 10) | Complete abduction and adduction of the resident's hip at least three times.   |       |
|   | 11) | Continue correctly supporting joints by placing one hand under the resident's knee and the other under the resident's ankle. |       |
|   | 12) | Bend the resident's knee and hip toward the resident's trunk. (flexion of hip and knee at the same time)                     |       |
|   | 13) | Straighten the resident's knee and hip. (extension of knee and hip at the same time)   |       |
|   | 14) | Complete flexion and extension of the resident's knee and hip at least three times.  |       |
|   | 15) | <b>The candidate <i>must ask</i> at least once if they are causing any pain or discomfort.</b>                               |       |
|   | 16) | Do not force any joint beyond the point of free movement.  |       |
|   | 17) | Leave the resident in a comfortable position.  |       |
|   | 18) | Lower bed.   |       |
|   | 19) | Open the privacy curtain.  |       |
|   | 20) | Maintain respectful, courteous interpersonal interactions at all times.  |       |
|   | 21) | Place the call light or signaling device within easy reach of the resident.  |       |
|   | 22) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.            |       |

## 19.) RANGE OF MOTION FOR A RESIDENT'S SHOULDER

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.             |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Raise the bed between mid-thigh and waist level.  |       |
|   | 4)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 5)  | Position the resident supine (bed flat).  |       |
|   | 6)  | Leave the resident in good body alignment.  |       |
|   | 7)  | Place one hand under the resident's elbow and the other hand under the resident's wrist.                                      |       |
|   | 8)  | Raise the resident's arm up and over the resident's head. (flexion)   |       |
|   | 9)  | Bring the resident's arm back down to the resident's side. (extension)  |       |
|   | 10) | Complete flexion and extension of the resident's shoulder at least three times.   |       |
|   | 11) | Continue correctly supporting joints by placing one hand under the resident's elbow and the other under the resident's wrist. |       |
|   | 12) | Move the resident's entire arm out away from the resident's body. (abduction)   |       |
|   | 13) | Return the resident's arm to the resident's side. (adduction)   |       |
|   | 14) | Complete abduction and adduction of the resident's shoulder at least three times.   |       |
|   | 15) | <b>The candidate <i>must ask</i> at least once if they are causing any pain or discomfort.</b>                                |       |
|   | 16) | Do not force any joint beyond the point of free movement.   |       |
|   | 17) | Leave the resident in a comfortable position.   |       |
|   | 18) | Lower bed.  |       |
|   | 19) | Open the privacy curtain.   |       |
|   | 20) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 21) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 22) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.             |       |

## 20.) STAND AND PIVOT-TRANSFER A RESIDENT FROM THEIR BED TO A WHEELCHAIR USING A GAIT BELT

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Obtain a gait belt.   |       |
|   | 4)  | Position the wheelchair close to the bed.   |       |
|   | 5)  | <b>Lock wheelchair brakes to ensure resident's safety.</b>  |       |
|   | 6)  | <b>Lock designated bed brake(s) to ensure resident's safety.</b>  |       |
|   | 7)  | Assist the resident in putting on non-skid footwear.  |       |
|   | 8)  | Assist the resident in a sitting position and lower the bed so the resident's feet are flat on the floor when the resident is sitting on the edge of the bed. |       |
|   | 9)  | Place a gait belt around the resident's waist.  |       |
|   | 10) | Tighten the gait belt to the appropriate fitting/size.  |       |
|   | 11) | Check the gait belt for tightness by slipping fingers between it and the resident to ensure the gait belt is secure.  |       |
|   | 12) | Face the resident and grasp the gait belt with both hands.  |       |
|   | 13) | Bring the resident to a standing position using proper body mechanics.  |       |
|   | 14) | Assist the resident in pivoting and sitting in the wheelchair in a controlled manner that ensures safety.   |       |
|   | 15) | Remove the gait belt.   |       |
|   | 16) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 17) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 18) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |

## 21.) VITAL SIGNS – TAKE AND RECORD A RESIDENT’S PULSE & RESPIRATIONS

| ✓ | #   | Skill Task Step   | Notes |
|---|-----|---|-------|
|   | 1)  | Perform hand hygiene.<br>a. Covers all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.  |       |
|   | 2)  | Explain the procedure to be performed to the resident.  |       |
|   | 3)  | Provide privacy for the resident; pull the privacy curtain.   |       |
|   | 4)  | Locate the radial pulse by placing the tips of fingers on the thumb side of the resident's wrist.   |       |
|   | 5)  | Count pulse for a full 60 seconds, or count for 30 seconds times two.<br>a. <i>Must verbally tell the RN Test Observer if you are counting for 60 seconds or for 30 seconds times two.</i><br>b. <i>Verbally tell the RN Test Observer when you start and stop counting.</i>        |       |
|   | 6)  | Record the resident’s pulse rate on the provided, previously signed recording form.   |       |
|   | 7)  | <b>The candidate's recorded pulse rate is within four (4) beats of the RN Test Observer’s recorded pulse rate.</b>  |       |
|   | 8)  | Count respirations for a full 60 seconds, or count for 30 seconds times two.<br>a. <i>Must verbally tell the RN Test Observer if you are counting for 60 seconds or for 30 seconds times two.</i><br>b. <i>Verbally tell the RN Test Observer when you start and stop counting.</i> |       |
|   | 9)  | Record the resident’s respirations on the provided, previously signed recording form.   |       |
|   | 10) | <b>The candidate's recorded respiratory rate is within two (2) breaths of the RN Test Observer’s recorded respiratory rate.</b>   |       |
|   | 11) | Open the privacy curtain.   |       |
|   | 12) | Maintain respectful, courteous interpersonal interactions at all times.   |       |
|   | 13) | Place the call light or signaling device within easy reach of the resident.   |       |
|   | 14) | Perform hand hygiene.<br>a. Cover all surfaces of the hands with hand sanitizer.<br>b. Rub hands together to dry.   |       |